FEE TRANSMITTAL					Complete if Known					
					cation Number	10/573,373			<del></del>	
					Date	9/22/2004				
					Named Inventor	Kenzo Takahashi				
Applicant claims small entity status. See 37 CFR 1.27					iner Name	Felicia C. King				
					nit	1789				
TOTAL AMOUNT OF PAYMENT (\$) 2200.00					Attorney Docket 0388 - 060908					
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order Other (please identify):										
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name:										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee										
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17										
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.										
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)										
1. BASIC FILING, SEARCH, AND EXAMINATION FEES										
	FILING	H FEES mall Entity		TION FEES mall Entity						
Application Typ		mall Entity Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)		Fees Pa	<u>aid (\$)</u>	
Utility	380	95	620	310	250	125				
Design	250	125	120	60	160	80				
Plant	250	125	380	190	200	100				
Reissue	380	190	620	310	750	375			<u>.</u>	
Provisional	250	125	0	0	0	0				
2. EXCESS CLAIM FEES									Small Entity	
Fee Description Fee (\$)									<u>Fee (\$)</u>	
Each claim over 20 (including Reissues)									30	
Each independent claim over 3 (including Reissues)								250 450	125 225	
Multiple dependent  Total Claims	- 20 or HP	Extra Cla	ims Fe	e (\$)	Fee Paid (\$)				ependent Claims	
14 -	29	= 0		0 =	0			ee (\$)	Fee Paid (\$)	
HP = highest number	of total claims paid	d for, if greater t	than 20.	<del></del>				0	0	
Indep. Claims	-3 or HP	Extra Cla		ee (\$)	Fee Paid (\$)					
HP = highest number	of independent cla	= <u>U</u> ims paid for if:		0 =						
HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE										
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$310 (\$155 for small entity) for each additional 50 sheets or fraction thereof.										
See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)										
$-100 = \frac{15x + 10 - 100}{50} = \frac{15x + 10 - 100}{50} = \frac{15x + 100}{$										
4. OTHER FEE(S)  Fees Paid (\$)										
Non-English Specification, \$130 fee (no small entity discount)										
Other (e.g., late filing surcharge): RCE (\$930); Extension of Time (\$1270) fees. \$2200.0										
SUBMITTED BY	1									
Signature	Shat	TIN	1/2		egistration No.	66,476	Telephone	e 41	2-471-8815	
Name (Print/Type) Anthony W. Brooks (Attorney/Agent) 66,476 Date December 13, 2011										

Doc. No. 2FG8874